

# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

2020 JUL 21 PM 3: 07

	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date: 06/16	/2020 Ending Date: 07/20/2020
Type of Report: (Check one)	
☐ 8th day preceding preliminary ☐ 8th day preceding election	⊠ 30 day after election
	YES Grafton
Candidate Full Name (if applicable)	Committee Name Jennifer Rowe
Office Sought and District	Name of Committee Treasurer  12 Magnolia Ln, North Grafton, MA 01536
Residential Address	Committee Mailing Address
E-mail:	E-mail: jalexa_96@yahoo.com / yesgrafton@gmail.com
Phone # (optional):	Phone # (optional): 857-222-7034
SUMMARY BALANC	E INFORMATION:
Line 1: Ending Balance from previous report	438.73
Line 2: Total receipts this period (page 3, line 11)	150
Line 3: Subtotal (line 1 plus line 2)	588.73
Line 4: Total expenditures this period (page 5, line	e 14) 588.73
Line 5: Ending Balance (line 3 minus line 4)	0
Line 6: Total in-kind contributions this period (pa	ge 6) 52.34
Line 7: Total (all) outstanding liabilities (page 7)	О
Line 8: Name of bank(s) used: Unibank	
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind of finance activity of all persons acting under the authority or on behalf of this committee in:  Signed under the penalties of perjury:  FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 bo	contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.    Contributions and liabilities for this reporting period and represents the campaign accordance with the requirements of M.G.L. c. 55.    Date: 07/20/2020
Candidate with Committee  I certify that I have examined this report including attached schedules and it is, to the	best of my knowledge and belief, a true and complete statement of all campaign finan cordance with the requirements of M.G.L. c. 55. I have not received any contributions
I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursements campaign finance activity of all persons acting under the authority or on behalf of this	i, in-kind contributions and liabilities for this reporting period and represents the
Signed under the penalties of perjury:	(Candidate's signature)

### SCHEDULE A. RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, Mathabetical order, for all receipts over \$50 in a calendar Mar. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Name and Residential Address Date Received (alphabetical listing required)		Amount	Occupation & Employer (for contributions of \$200 or more)	
6/24/2020	Carlson, Peter 42 Old Upton Road, Grafton, MA 01519	150	Senior Solutions Architect, Winslow Technology Group	
The second secon				
Line 9: Total Rece	eipts over \$50 (or listed above)	150		
Line 10: Total Rec	eipts \$50 and under* (not listed above)			
	RECEIPTS IN THE PERIOD	150	← Enter on page 1, line 2	

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## **SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
	<b>V</b> b		
Line 9: Total Rece	cipts over \$50 (or listed above)		
Line 10: Total Reco	eipts \$50 and under* (not listed above)		
Line 11: TOTAL	RECEIPTS IN THE PERIOD		← Enter on page 1, line 2

<sup>\*</sup> If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

#### **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
7/9/2020	Often, Laura	79 Old Westboro Rd North Grafton, MA 01536	Reimbursement for Telegram & Gazette article in The Grafton News	250
07/14/2020	Often, Laura	79 Old Westboro Rd North Grafton, MA 01536	Reimbursement for Facebook Ads	186.59
7/9/2020	Spinney, Elizabeth	71 Potter Hill Rd Grafton, MA 01519	Reimbursement for Postcard Postage, purchased from USPS on 6/15/20	21
7/20/2020	Spinney, Elizabeth	71 Potter Hill Rd Grafton, MA 01519	Reimbursement for printed materials, from Vistaprint on 6/1/20	131.14
	J[	Line 12: Total Expenditures o	ver \$50 (or listed above)	588.73
		Line 13: Total Expenditures \$5	50 and under* (not listed above)	
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDI	TURES IN THE PERIOD	588.73

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

Page 4

#### **SCHEDULE B: EXPENDITURES (continued)**

To Whom Paid Continued				
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount
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		Line 12: Expenditures over \$50	(or listed above)	
		Line 13: Expenditures \$50 and under* (not listed above)		
	ř			
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	

<sup>\*</sup> If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
7/20/2020	Spinney, Elizabeth	71 Potter Hill Rd Grafton, MA 01519	Printed materials, from Vistaprint on 6/1/20	52.34
				Alle MATO
		Line 15: fo Vind Contribution	one over \$50 (or listed shows)	52.34
			ons over \$50 (or listed above) ons \$50 & under (not listed above)	32.34
	Enter on page 1, line 6 -	Line 17: TOTAL IN-KIND	CONTRIBUTIONS	52.34

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

Page 6

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	Enter on page 1, line 7 →	Line 18: TOTAL OUTSTANI	DING LIABILITIES (ALL)	